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CONFIRMATION NO. 5437

SERIAL NUMBER 10/757,797	FILING OR 371(c) DATE 01/14/2004 RULE	CLASS 446	GROUP ART UNIT 3714	ATTORNEY DOCKET NO. 03-DIS-005-PR-US-UTL
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APPLICANTS

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**** CONTINUING DATA *******

This appln claims benefit of 60/440,291 01/14/2003 *YES AR*

**** FOREIGN APPLICATIONS ********AR***IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

04/21/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY CA	SHEETS DRAWING <i>112</i>	TOTAL CLAIMS <i>515</i>	INDEPENDENT CLAIMS <i>82</i>
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ADDRESS

60228

TITLE

Animatronic supported walking system

FILING FEE RECEIVED 1716	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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